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| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | | Docket No. 6006-157 | |
| Applicant(s): Christopher E. Banas, et al. | | | | | |
| Application No. 10/840,205 | Filing Date 5/6/04 | Examiner Thomas C. Barrett | Customer No. 29,335 | Group Art Unit 3738 | Confirmation No. 7254 |
| Invention: METALLIC IMPLANTABLE GRAFT AND METHODS OF MAKING SAME | | | | | |
| <u>COMMISSIONER FOR PATENTS:</u> | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 16 - | 20 = | 0 | x \$50.00 | \$0.00 |
| INDEP. CLAIMS | 2 - | 3 = | 0 | x \$200.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 18-2000 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
|  _____ Signature | | | Dated: February 2, 2007 | | |
| Donna E. Becker (Reg. No. 44,529) ROSENBAUM & ASSOCIATES, P.C. 650 Dundee Road Suite #380 Northbrook, IL 60062 Tel: (847) 770-6000 Fax: (847) 770-6006 | | | <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><i>Certificate of Electronic Filing</i></p> <p>I hereby certify that this correspondence is being deposited with the <u>United States Postal Service</u> with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p> <p style="text-align: center;"><u>February 2, 2007</u></p> <p style="text-align: center;">(Date)</p> <p style="text-align: center;"> _____ Signature of Person Mailing Correspondence</p> <p style="text-align: center;">Lori Dunham _____ Typed or Printed Name of Person Mailing Correspondence</p> </div> | | |
| CC: | | | | | |